

DO/EO BIBLIOGRAPHIC DATA ENTRY

SERIAL NUMBER: 08 / 732408
IA NUMBER: PCT/ EP95 / 01357 RECEIPT DATE: 10 / 22 / 96
FAMILY NAME: REINMULLER IA FILING DATE: 04 / 12 / 95
GIVEN NAME: JOHANNES DELAY WAIVED (Y/N): Y
PRIORITY CLAIMED (Y/N): Y DEMAND RECEIVED (Y/N): Y
NO BASIC FEE (Y/N): N PRIORITY DATE: 04 / 22 / 94
ATTORNEY DOCKET NUMBER: HUBR1099PFFM US DESIGNATED ONLY (Y/N): N
CORRESPONDENCE NAME/ADDRESS: CUSTOMER NUMBER: COUNTRY: EPX
NAME: MARY ANNE SCHOFIELD TELEPHONE: 2126889200
FELFE & LYNCH
STREET: 805 THIRD AVENUE

CITY: NEW YORK,
STATE/COUNTRY: NY ZIP: 10022
APPLICATION TITLES:
MEDICAL IMPLANTS MADE OF MOULDINGS

TAB TO LAST POSITION, PUSH SEND